THE DEPARTMENT OF FINANCIAL INSTITUTIONS 402 WEST WASHINGTON STREET, ROOM W-066 INDIANAPOLIS, INDIANA 46204

☐ APPLICATION TO ESTABLISH A BRANCH OFFICE OR OFFICES ☐ APPLICATION TO RELOCATE A BRANCH OFFICE ☐ APPLICATION TO RELOCATE A MAIN OFFICE ☐ APPLICATION FOR A MOBILE BRANCH

(Check One)

ddress of					Date of Application
	f Main Office				
ity		County	State		Zip Code
١.	Premises to be occupied	as a Branch, Main Of	fice or Mobile Bra	nch	
ame					
ldress (If one has not been assigned, provide descr	iption of location.)			
ty		County	State		Zip Code
ojected	Date of Opening or Relocation				
	Status of Proposed Site: Does Proposed Site Meet If above answer is NO	Existing Zoning Requir		☐ Leased☐ Yes☐ Yes☐	□ No □ No
	Type of Occupancy (Chec		e of quarters at opening and		ment quarters.)
		k all which apply to indicate both typesed Temporal	ry quarters	contemplated perma	unent quarters.) ent quarters owned
	Type of Occupancy (Chec	k all which apply to indicate both typesed Temporal	ry quarters	contemplated perma	
and	Type of Occupancy (Chec	k all which apply to indicate both typesed Temporal respond to the most recent Consolida	ry quarters	contemplated perma	ent quarters owned
	Type of Occupancy (Chec ☐ Permanent quarters lea Bank Premises (*Should cor	k all which apply to indicate both typesed Temporal respond to the most recent Consolida	ry quarters	contemplated perma	ent quarters owned
Building	Type of Occupancy (Chec ☐ Permanent quarters lea Bank Premises (*Should cor	k all which apply to indicate both typesed Temporal respond to the most recent Consolida	ry quarters	contemplated perma	ent quarters owned
Building Constru	Type of Occupancy (Checomology Permanent quarters lease Bank Premises (*Should continue)	k all which apply to indicate both typesed Temporal respond to the most recent Consolida	ry quarters	contemplated perma	ent quarters owned
Leaseho	Type of Occupancy (Checomology Permanent quarters lease Bank Premises (*Should condition in progress	k all which apply to indicate both typesed Temporal respond to the most recent Consolida	ry quarters	contemplated perma	ent quarters owned

EFFECTIVE 6/27/2001

GENERAL INFORMATION

- 1. Three executed copies of the application are to be filed with the Department. Additional information may be requested. Any clarification as to information necessary to complete this application should be directed to the Department of Financial Institutions, telephone (317) 232-3955.
- 2. The applicant should contact its primary Federal Regulatory Authority to determine the Federal requirements for the type of application being submitted. Please provide the Department with copies of all correspondence with Federal Regulatory Agencies regarding the application.
- 3. The applicant will be billed according to the current fee schedule following the review of the application.
- 4. Attach a listing of the name and address of each existing branch office of the Applicant in the order in which they were established. Also include those branches which are approved but not yet in operation (designate with *).
- 5. If the applicant is requesting approval for more than one branch due to a purchase and assumption of more than one branch, only one application is needed. However, Section A must be completed separately for each branch location. Also provide a copy of the Federal application completed for a purchase and assumption transaction.

ANSWERS TO THE FOLLOWING QUESTIONS SHOULD BE PROVIDED IN LETTER FORM AND ATTACHED TO THE APPLIACATIONS COVER SHEET

- 1. Provide a brief description of the premises to be occupied, services to be offered, and terms of any contracts or leases that will be entered into.
- 2. If the proposed transaction involves an officer, director or ten (10) percent shareholder, or their interests, please provide details concerning any financial arrangements relating to fees, the acquisition of property, leasing of property, and construction contracts.
- 3. If any of the proposed branches are located in a state other than Indiana, the applicant must provide copies of host state laws which authorize the applicant to establish a branch in that state. The applicant must also provide a written analysis of the laws verifying that the laws of the host state will not be violated if the branch is approved.

RESOLUTION OF THE BOARD OF DIRECTORS OF THE APPLICANT BANK

The Board of Directors (Trustees) of App	plicant at a meeting du	ıly called and held on	
adopted the following Resolution:			
"WHEREAS, it is the consensus of this to the Department of Financial Institution Bank, Office of Thrift Supervision as approach, or relocate a Main Office or Branch, or relocate a Main Office or B	ns, the Federal Deposi plicable, for written co nch Office located at	t Insurance Corporation ar	nd/or Federal Reserve more Branches, Mobile
NOW, THEREFORE, IT IS RESOLV are hereby authorized and directed to material Institutions, and appropriate Ferelocate a Main or Branch Office. The offrom them, in connection therewith inforstatutes and to provide such assurance as appropriate Federal Agency."	ke application on behaderal Agency, to estal ficers are further auth mation on the several	alf of this institution to the olish one or more Branches orized to provide informat factors enumerated in the	Indiana Department of s, Mobile Branch, or ion on forms obtained State and Federal
The above Resolution has not been rescin Applicant institution.	nded or modified and	has been duly entered in th	e minute book of the
It is respectfully requested that the Depar Federal Agency, conduct or cause to be r this application should be approved or di	nade the necessary inv		
Date			
Name of Applicant			
Address			
City (Bank Seal in Space Below)	County	State	Zip Code
(Balik Bear in Space Below)	ATTEST:		
	President or V	Vice President	
	Cashier or Se	cretary	

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